

**For flocks which are not participating in the National Poultry Improvement Plan, a completed Owner Endorsed Avian Interstate Health Statement or Certificate of Veterinary Inspection must accompany all avian species and hatching eggs imported into Pennsylvania. If the birds or hatching eggs are shipped through a courier or delivery service, the certificate must be affixed to the outside of the container and must be clearly visible and legible. A copy of the certificate and negative test report must be sent to PDA within the seven days after shipment. The Owner Endorsed Avian Interstate Health Statement *must* be endorsed with the bird owner's signature.**

The following information is required:

**1. Owner (shipper) Information:**

- a. Name: \_\_\_\_\_
- b. Address: \_\_\_\_\_  
Street, Route, or Box Number
- \_\_\_\_\_
- City State Zip
- c. Telephone number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
- d. Email address: \_\_\_\_\_

**2. Destination Information:**

- a. Name: \_\_\_\_\_
- b. Address: \_\_\_\_\_  
Street, Route, or Box Number
- \_\_\_\_\_
- City State Zip
- c. Telephone number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_
- d. Email address: \_\_\_\_\_

**3. Bird or hatching egg description:**

- a. Breed(s): \_\_\_\_\_  
\_\_\_\_\_
- b. Age(s): \_\_\_\_\_

**If greater than 3 weeks of eggs OR if eggs, the source flock test results: Lab name:** \_\_\_\_\_

**Lab test accession number:** \_\_\_\_\_

**c. Gender(s): (circle all that apply)**

Male      Female      Unknown      Eggs      Hatching Eggs

**d. Production type(s)/Purpose(s): (circle all that apply)**

Egg type      Meat type      Exhibition type      Raised for Release

Zoo      Pet      Other (describe) \_\_\_\_\_

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I certify that the above information represents a true and accurate statement regarding my bird(s) and their home flock(s). I further attest and affirm that these birds or hatching eggs entering PA are free from evidence of infectious or contagious diseases. I affirm the foregoing to be true and correct, and make this statement subject to the penalties of 18 Pa.C.S.A. §4904, relating to unsworn falsification to authorities.

**4. Owner signature:** \_\_\_\_\_

**5. Date signed:** \_\_\_\_\_